NANTUCKET REGIONAL TRANSIT AUTHORITY
3 EAST CHESTNUT STREET
NANTUCKET, MA 02554
(508) 325-9571, (508) 325-0788 (fax)
nrta@nantucket-ma.gov www.nrtawave.com

ADVERTISING CONTRACT

Date: _____ Name of Advertiser: _____
Phone#: _____ Contact Person: _____
Mailing Address: _____
E-mail address: _____

ADPOCKETS: 4" X 9" BROCHURES

Duration of Ad: Season _____ Weekly _____
$500/season or $35/week Non-Profit: $225/season or $15/week

If weekly indicate the number of weeks the ad is to appear _____, indicate the dates the ad is to appear (beginning dates on Mondays): _____

ADSIGNS: 24" X 11" SELF ADHESIVE VINYL

Advertiser is responsible for production of the advertising sign. Indicate the number of signs:
____ 2 signs ($500) ___ 4 signs ($800) ___ 6 signs ($1,000) ___8 signs ($1,350)

ADPOSTERS: 8 ½" X 11" OR 8 ½" X 14"

This space is available for a period of 1 to 4 weeks only.
_____ # of weeks to be displayed ($100/week, town/non-profit rate $75/week)
Date to be displayed:_____ _____

50% deposit is required to reserve space, and is nonrefundable. The remaining balance is due when you provide the advertising to the NRTA.

Total Cost of Advertising:
Amount Paid:
Balance Due:

_____
Signature of Advertiser

For NRTA use only.
Date Received: Amount Received: Check#:

_____
Paula Leary
NRTA Administrator